| • | | | | | | | | | 91' | | 1 51 | 1 | | |
|--|---|---------------------------------|--------------|--------------------|-------------------------|------------------|--------|------------------------------|------------------------|---------------|---------------------|------------------------|--|--|
| | | | | | | | | Application or Docket Number | | | | | | |
| PATENT APPLICATION FEE DETERMINATION RECORD | | | | | | | | | | | | | | |
| Effective October 1, 2000 09 7/8871 | | | | | | | | | | | | | | |
| CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2) | | | | | | | | TEI | YTTY | OR | OTHER SMALL | | | |
| TOTAL CLAIMS | | | 22 | | | | RA | RATE F | | | RATE | FEE | | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | BASI | BASIC FEE 355.00 | | OR | BASIC FEE | 710.00 | | |
| TOTAL CHARGEABLE CLAIMS | | | 22 minus 20= | | . 2 | | X\$ 9= | | | OR | X\$18⊨ | 36 | | |
| IND | EPENDENT CL | AIMS | 4 minus 3 = | | • / | | X40= | | | OR | X80= | 80 | | |
| MU | LTIPLE DEPENI | DENT CLAIM P | RESENT | | | | +135= | | | OR | +270= | · | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | TO | TOTAL | | OR | TOTAL | 826 | | |
| CLAIMS AS AMENDED - PART II | | | | | | | | | | , — | OTHER | | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | SM | ALL! | ENTITY | OR | SMALL | NTITY | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER | | NUN PREVI | HEST ABER OUSLY | PRESENT EXTRA | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | |
| | Total | AMENDMENT | Minus | •• .7 | FOR | - | xs | 9= | 725 | OR | X\$18= | | | |
| | Independent | . 4 | Minus | | W | | YA | 0 <u>=</u> | | | X80= | | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT C | | | | CLAIM | | | | | OR | | | | |
| DECT AVAILABLE CODY | | | | | | | | 5= | | OR | +270= TOTAL | | | |
| Q | BEST AVAILABLE COPY | | | | | | | ADDIT. FEE | | OR ADDIT. FEE | | | | |
| 1 | | (Column 1) | 1000 miles | | IMN 2) | (Column 3) | _ | | F | ŀ | | 100 | | |
| MT B | | REMAINING AFTER AMENDMENT | | NUI PREV | MBER TOUSLY O FOR | PRESENT EXTRA | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | |
| AMENDMENT | Total | . 28 | Minus | " 6 | 281 | - () | X\$ | 9= | | OR | X\$18= | | | |
| | Independent | · Y | Minus | OF NIDEN | T C1 A11 | | X4 | 0= | | OR | X80= | | | |
| _ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM. | | | | | | +13 | 35= | | OR | +270= | | | |
| | 1.) C. | -305 | | | | | ADDIT | OTAL | | OR | TOTAL ADDIT, FEE | | | |
| | 17216 | (Column 1) | . (Colu | | mn 2) (Cotumn 3) | | | ; | 1. 1 | - | * * * | | | |
| MC | | CLAIMS REMAINING AFTER | | HIG NUI PREV | HEST MBER. ROUSLÝ | PRESENT | RA | TE | ADDI- TIONAL | | RATE | ADDI- TIONAL FEE | | |
| NDMENT C | Total | · 2 2 | Minus | 144 | D FOR: | - | XS | 9= | FEE | ОЯ | X\$18= | FEE | | |

Sall wall नुप्रदेश विकास

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

Minus

· Ul:

If the entry in cotions 1 is less than the entry in column 2, write "o" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. OR ADDIT, FEE

FORM PTO-875 (Rev. 870)

Independent

OR

X80=

+270=

X40=

+135=